

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/562188

FILING DATE

21 JAN 2007

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 2 nd AMENDMENT | |
|--------------|----------|------|------------------------------------|------|------------------------------------|------|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 1 | / | | | | | |
| 2 | / | 2 | | | | |
| 3 | / | 2 | | | | |
| 4 | / | 2 | | | | |
| 5 | / | 2 | | | | |
| 6 | / | 2 | | | | |
| 7 | / | 2 | | | | |
| 8 | / | 2 | | | | |
| 9 | / | 2 | | | | |
| 10 | / | 2 | | | | |
| 11 | / | 2 | | | | |
| 12 | / | 2 | | | | |
| 13 | / | 1 | | | | |
| 14 | / | 1 | | | | |
| 15 | / | 1 | | | | |
| 16 | / | 1 | | | | |
| 17 | / | 1 | | | | |
| 18 | / | 1 | | | | |
| 19 | / | 1 | | | | |
| 20 | / | 1 | | | | |
| 21 | / | 1 | | | | |
| 22 | / | 1 | | | | |
| 23 | / | 1 | | | | |
| 24 | / | 2 | | | | |
| 25 | / | 2 | | | | |
| 26 | / | 1 | | | | |
| 27 | / | 1 | | | | |
| 28 | / | 1 | | | | |
| 29 | / | 1 | | | | |
| 30 | / | 1 | | | | |
| 31 | / | 1 | | | | |
| 32 | / | 1 | | | | |
| 33 | / | 1 | | | | |
| 34 | / | 1 | | | | |
| 35 | / | 1 | | | | |
| 36 | / | 1 | | | | |
| 37 | / | 1 | | | | |
| 38 | / | 1 | | | | |
| 39 | / | 1 | | | | |
| 40 | / | 2 | | | | |
| 41 | / | 1 | | | | |
| 42 | / | 1 | | | | |
| 43 | / | 1 | | | | |
| 44 | | | | | | |
| 45 | | | | | | |
| 46 | | | | | | |
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| 48 | | | | | | |
| 49 | | | | | | |
| 50 | | | | | | |
| TOTAL IND. | 13 | 3 | | | | |
| TOTAL DEP. | 27 | 24 | | | | |
| TOTAL CLAIMS | 40 | 27 | | | | |

| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 2 nd AMENDMENT | |
|--------------|----------|------|------------------------------------|------|------------------------------------|------|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 51 | | | | | | |
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| 99 | | | | | | |
| 100 | | | | | | |
| TOTAL IND. | | | | | | |
| TOTAL DEP. | | | | | | |
| TOTAL CLAIMS | | | | | | |